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Bib Data Sheet

SERIAL NUMBER 09/593,795	FILING DATE 06/14/2000 RULE -	CLASS 379	GROUP ART UNIT 2722	ATTORNEY DOCKET NO. CON1246-076
APPLICANTS Hassan Pirasteh, Jacksonville, FL ; John Garrow, Jacksonville, FL ; Shelly Grossmith, Jacksonville, FL ; Khadim Hussain, Jacksonville, FL ;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/16/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY FL	SHEETS DRAWING 3	TOTAL CLAIMS 27
			INDEPENDENT CLAIMS 2	
ADDRESS Jeffrey S Standley Standley & Gilcrest LLP 495 Metro Place South Suite 210 Dublin ,OH 43017				
TITLE Method and system for processing telephone calls by IVR				
FILING FEE RECEIVED 946	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 5741

SERIAL NUMBER 09/593,795	FILING DATE 06/14/2000 RULE	CLASS 379	GROUP ART UNIT 2722	ATTORNEY DOCKET NO. CON1246-076
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APPLICANTS

Hassan Pirasteh, Jacksonville, FL;
John Garrow, Jacksonville, FL;
Shelly Grossmith, Jacksonville, FL;
Khadim Hussain, Jacksonville, FL;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 08/16/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY FL	SHEETS DRAWING 3	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>ML</i>				

ADDRESS

8698

TITLE

Method and system for processing telephone calls by IVR

FILING FEE RECEIVED 946	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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